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PATENT  
EMC-97-028CON1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:	Yael Melman	GROUP ART UNIT:	2145
U.S.S.N.:	09/833,906	EXAMINER:	Cardone, Jason D.
FILING DATE:	November 15, 2000	CUSTOMER NO.	24227
TITLE:	<i>COMMUNICATION MECHANISM AND METHOD FOR EASILY TRANSFERRING INFORMATION BETWEEN PROCESSES</i>		

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

The undersigned hereby certifies that this document is being placed in the United States mail with first-class postage attached, addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on October 6, 2004.

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE TO RESTRICTION REQUIREMENT**

Sir:

This is in response to the Restriction Requirement mailed October 1, 2004.

Applicant hereby elects the claims of Group 1, claims 1, 3, 5, 8-15, 20 and 22-26, for examination in the present application. This election is made with traverse.

In view of the foregoing, the applicants' believe that the application is in condition for allowance and respectfully request favorable reconsideration.

Applicant: Yael Melman  
U.S.S.N.: 09/833,906  
Filing Date: November 15, 2000  
EMC Docket No.: EMC-97-028CON1

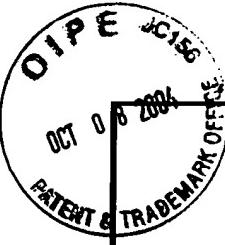
In the event the Examiner deems personal contact desirable in the disposition of this case,  
the Examiner is invited to call the undersigned attorney at (508) 293-6985.

Please charge all fees occasioned by this submission to Deposit Account No. 05-0889.

Respectfully submitted,

Dated: October 6, 2004

  
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2145  
AP

# TRANSMITTAL FORM

		Application No.:	09/833,906
		Filing Date:	November 15, 2000
		First Named Inventor:	<b>Yael Melman</b>
		Group Art Unit	2145
		Examiner:	Cardone, Jason Technology Center 2100
		Customer No.	24227
Total Number of Pages in this Submission:		Docket No.	EMC-97-028CON1

## ENCLOSURES (check all that apply)

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Authorization for the Commissioner to charge Deposit Account No. 05-0889 for fees associated with this transaction (in duplicate)  | <input type="checkbox"/> Assignment<br><input type="checkbox"/> Recordation Cover Sheet   | <input type="checkbox"/> Petition for Revival of an Unintentionally Abandoned Application [37 CFR 1.137(b)] (in duplicate)  |
| <input type="checkbox"/> Amendment/Response<br><br>□ After Final<br><br>□ Affidavits/Decl.   | <input type="checkbox"/> Declaration/Power of Attorney<br><br><input type="checkbox"/> Copy of Notice to File Missing Parts of Nonprovisional Application<br><br><input type="checkbox"/> Revocation of Power of Attorney<br><br><input type="checkbox"/> Formal Drawings<br><input type="checkbox"/> Letter to Official Draftsperson with three (3) sheets of redlined changes to drawings | <input type="checkbox"/> Associate Power of Attorney<br><br><input type="checkbox"/> Form PTOL-85B, Part B -Issue Fee Payment Transmittal," (in duplicate)<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Status Inquiry |
| <input type="checkbox"/> Extension of Time Request for _____ Months  | <input type="checkbox"/> Copy of PTO 948, "Notice of Draftsperson's Patent Review"  | <input checked="" type="checkbox"/> Response to Restriction Requirement<br><input checked="" type="checkbox"/> Certificate of First Class Mailing<br><input type="checkbox"/> Certificate of Express Mail Mailing<br><input checked="" type="checkbox"/> Postcard   |
| <input type="checkbox"/> Request for Continued Examination Transmittal<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Additional Enclosures:  |   |

## SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

October 6, 2004

Date

Robert Kevin Perkins Esq. (Reg. No. 36,634)  
 EMC Corporation  
 Office of the General Counsel  
 176 South Street  
 Hopkinton, MA 01748

## CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8]

I hereby certify that this correspondence and the above-referenced enclosures are being:

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Date

Signature

Sandra A. Kulaga

Typed or printed name of person signing certificate